

*Please see reverse for instructions*

**Applicant**

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**What Information Are You Requesting? Please check one ✓**

My own personal information

Personal information for another

General information

person (*Attach proof of authority*)

I wish to obtain access to the following records:

Applicant's Signature: \_\_\_\_\_

**FOR PUBLIC BODY USE ONLY**

Date Received: \_\_\_\_\_ Number: \_\_\_\_\_

Send Top Copy. Retain Other Copy for Your Records.

## INSTRUCTIONS

### ***Please***

- Make only one request on each application form.
- Describe the records or information to which you want access in as much detail as possible.
- Send or take this form to the Access and Privacy Coordinator of the public body most likely to have the records you wish access to. Addresses of Coordinators are provided in the ***Access and Privacy Directory*** found in most public body offices and public libraries, or on the **Internet** at [www.gov.mb.ca](http://www.gov.mb.ca).

The addresses may also be obtained by calling the

- Government Records Office (945-3738 or toll free in North America 1-800-617-3588)  
or
- Manitoba Government Inquiry (945-3744 or toll free in North America 1-866-626-4862)
- Keep a copy for your records.
- Note that you may be asked to pay certain costs as prescribed by Regulation, before gaining access to records.
- Note that if the public body does not respond within 30 days of receipt of this application, or if the public body extends this 30-day time period under subsection 15(2) of the Act, you may file a complaint with the Office of the Ombudsman.

**Personal information collected on this form is protected by  
*The Freedom of Information and Protection of Privacy Act*  
and will be used only to respond to this request.  
Inquiries about the use and protection of this personal information  
should be directed to the Access and Privacy Coordinator  
of the public body to whom the application is sent.**

## ESTIMATE OF COSTS



In accordance with subsection 82(2), you are being advised by this estimate that there is a fee payable for responding to your application for access to records. The estimate is as follows, based on charges authorized under sections 4 and 6 of the *Access and Privacy Regulation*:

APPLICATION NUMBER: \_\_\_\_\_

**Search and Preparation Fee:**

Time in excess of two hours . . . . . \_\_\_\_\_ hours  
Estimated cost (at \$15.00 each half hour) . . . . . \$ \_\_\_\_\_

**Computer Programming and Data Processing Fee:**

- Internal work  
Time estimate . . . . . \_\_\_\_\_ minutes  
Estimated cost (at \$10.00 each 15 minutes) . . . . . \$ \_\_\_\_\_
- External Work  
Estimated cost (at actual cost) . . . . . \$ \_\_\_\_\_

**Total of estimated costs . . . . . \$ \_\_\_\_\_**

**Please note:** There is generally an additional charge for obtaining copies.

A refund will be made if access to every record requested is refused, or if the actual cost is less than this estimate.

**Signed:** \_\_\_\_\_  
(Access and Privacy Officer or Coordinator)

**Name of Public Body:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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Please indicate your willingness to proceed by signing below and returning a copy of this form with a cheque payable to \_\_\_\_\_. Applicants have up to 30 days from the date the estimate is given to indicate if it is accepted or to modify the request in order to change the amount of the fees. After this period, the application would be considered to be abandoned. We shall notify you when the records are ready.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_